117000070540

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2011 AUG 28 PN 1: 40

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2017 AUG 28 PM 1: 40

Attn: Karen Saly

From: Sniders Tires LLC

Document #: L1700070540

Date: 08/28/2017

1 Jeremy Jimenez), release the name Ultimate Rides to Sniders Tires VLC. I am no longer using this fictitious name for business purposes. My document number is P07000125377.

Sniders Tires LLC will be able to use this name with full rights for business purposes and I will no longer have any affiliation with Ultimate Rides.

Steven Snider

Signature: Steven Snider

Date: 08/28/2017

Jeremy Jimenez

Signature:

DateL 08/28/2017

Witness:

Jeffrey Spink

Signature: <u>Jeffrey Spink</u>

COVER LETTER

TO: Registration Sect Division of Corp				
SUBJECT:	Snicker's Name of Limit	Tires LLC ed Liability Company		
The enclosed Articles of A	mendment and fee(s) are subm	nitted for filing.		
Please return all correspon	dence concerning this matter to	o the following:		
	SH	even Snider		
		Name of Person		
	Firm/Company			
	1632 Sto	Ate Ave. Unit	<u> </u>	
	Holly Aill	FL 33117 City/State and Zip Code		
		o be used for future annual rep		
For further information co	ncerning this matter, please ca	II:		
Stever Name of	Person	at (<u>386</u>) Area Code	Daytime Telephone Number	
Enclosed is a check for th	e following amount:			
□ - \$ 25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ARTICLES OF O		-11	
		2017 AUG 2	
(Name of the Limited Liability Compan (A Florida Limited Li	iv as it now appears on our records.) lability Company)	2017 AUG 28 PAI 1: 40	
The Articles of Organization for this Limited Liability Company v	were filed on March 18th	1968 29127	
Florida document number <u>L1700070840</u>			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company here:		
Ultimate Rides LLC		4. 11. 12. 11. 0.	
The new name must be distinguishable and contain the words "Limited Liabili	1	the appreviation "L.L.C.	
Enter new principal offices address, if applicable:	1532 SER AM	<u>"</u>	
(Principal office address MUST BE A STREET ADDRESS)	- Holly H.II, P1 ?	3,2117	
	386-898-008	<u> </u>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		nter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
	City	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Doniel Reyes	1066 Alta Dr.	Q Add
		Holly Hill, F1 32117	Remove
		386-679-8723	Change
			□ Remove
			Change Add Remove Change
			Remove
		 	Change
			🗆 Add
			☐ Remove
			Change
			□ Add
			☐ Remove
			Change
			🗆 Add
			Remove
			Change

	other information, enter				
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ffective date, if	other than the date of fil listed, the date must be specific	ing:	a of filing or more than 90	(optional)	n 605 02
an effective date is lote: If the date i	nsted, the date must be specific nserted in this block does no	of meet the applicable:	statutory filing requiren	nents, this date will not be	e listed
ocument's effecti	ve date on the Department of	of State's records.			
e record speci	fies a delayed effective	e date, but not an	effective time, at	12:01 a.m. on the ϵ	earlier
The 90th day	after the record is file	ed.			
ated Au	a 12th	<u> 2017</u> .			
	g 12th				
	/) rid	<u> </u>			_
	Signature o	f a member or authorized	representative of a memb	ner	
	(120	7 . 1			
	7.45AJ	shider	ne of signee		

Page 3 of 3

Filing Fee: \$25.00



August 21, 2017

STEVEN SNIDER 1532 STATE AVE, UNIT H HOLLY HILL, FL 32117

SUBJECT: SNIDER'S TIRES LLC Ref. Number: L17000070540

We have received your document for SNIDER'S TIRES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is P07000125377 "ULTIMATE RIDES CORP.".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 017A00017143

Karen A Saly Regulatory Specialist II